

CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

1. DATE OF REPORT <u>7-25-01</u>		2.a. NAME OF CANDIDATE OR COMMITTEE <u>Jim Adams</u>		
2.b. IF COMMITTEE, NAME OF CANDIDATE		3. ELECTION DATE <u>6-12-01</u>		
4.a. CAMPAIGN ADDRESS AND PHONE Street or Rural Route City State Zip Code Phone <u>517 SODDYVIEW LN</u> <u>SODDY-DAISY</u> <u>TN</u> <u>37379</u> <u>332-9272</u>				
4.b. CANDIDATE'S HOME ADDRESS (if different than 4.a.) Street or Rural Route City State Zip Code Phone <u>SAME AS 4A</u>				
5. OFFICE SOUGHT (include district number, if applicable) <u>CITY COMMISSION</u>		6. NAME OF POLITICAL TREASURER (may be candidate) <u>Jim Adams</u>		
7. CATEGORY OR REPORT (Check one) PRE-PRIMARY <input type="checkbox"/> POST-PRIMARY <input type="checkbox"/> PRE-GENERAL <input type="checkbox"/> POST-GENERAL <input checked="" type="checkbox"/> SUPPLEMENTAL <input type="checkbox"/> AMENDED <input type="checkbox"/>				
8.a. BEGINNING DATE OF REPORTING PERIOD <u>3-01-01</u>		8.b. ENDING DATE OF REPORTING PERIOD <u>7-25-01</u>		
9. (Check one) a. <input type="checkbox"/> This campaign is exempt from detailed disclosure because contributions (including in-kind) received total \$1,000 or less AND expenditures total \$1,000 or less for this reporting period. (Complete items 12d., 12e. and 12f.) b. <input checked="" type="checkbox"/> This campaign is required to file a detailed financial disclosure because contributions (including in-kind) received total more than \$1,000 and/or expenditures total more than \$1,000 for this reporting period.				
10. I/we do solemnly swear or affirm that the information contained in this campaign financial disclosure report is true and that this report is an accurate accounting of campaign contributions and expenditures required to be reported by the candidate committee by the Campaign Financial Disclosure Act. Additionally, I/we swear or affirm that no campaign contributions have been expended for the personal financial benefit of the candidate or for any other nonpolitical purpose as defined by the federal internal revenue code.				
<u>Jim Adams</u> signature of candidate		<u>Jim Adams</u> signature of political treasurer		
<u>7-25-01</u> date		<u>7-25-01</u> date		
11. SWORN TO AND SUBSCRIBED BEFORE ME IN THE STATE OF <u>Tennessee</u> THIS <u>25</u> DAY OF <u>July</u> 20 <u>01</u> <u>Rosetta Dipton</u> notary public <u>My Commission Expires May 8, 2004</u> date commission expires Notary Seal		SWORN TO AND SUBSCRIBED BEFORE ME IN THE STATE OF <u>Tennessee</u> THIS <u>25</u> DAY OF <u>July</u> 20 <u>01</u> <u>Rosetta Dipton</u> notary public <u>My Commission Expires May 8, 2004</u> date commission expires Notary Seal		
12. SUMMARY				
a. BALANCE ON HAND LAST REPORT		\$ <u>0.00</u>		
b. TOTAL RECEIPTS THIS PERIOD		\$ <u>325.00</u>		
c. TOTAL DISBURSEMENTS THIS PERIOD		\$ <u>118.00</u>		
d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.)		\$ <u>-793.48</u>		
e. TOTAL LOANS OUTSTANDING		\$ <u>0.00</u>		
f. TOTAL OBLIGATIONS OUTSTANDING		\$ <u>0.00</u>		



SUMMARY PAGE - CANDIDATE

13. NAME OF CANDIDATE OR COMMITTEE (In Full) <u>Tim Adams</u>	14. REPORT COVERING THE PERIOD FROM: <u>3-01-01</u> TO: <u>7-25-01</u>
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RECEIPTS

15. CONTRIBUTIONS (other than loans and interest)

a. Unitemized Contributions (\$100 or less from each source this period) \$ 75.00

b. Itemized Contributions (over \$100 from each source this period) \$ 250.00

c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.) \$ 325.00

16. LOANS RECEIVED THIS REPORTING PERIOD \$.00

17. INTEREST RECEIVED THIS REPORTING PERIOD \$.00

18. TOTAL RECEIPTS (add 15.c., 16., and 17.) (must be shown in item 12.b.) \$ 325.00

DISBURSEMENTS

19. EXPENDITURES (other than loan payments)

a. Expenditures (\$100 or less each payee this period) (must be listed by category - e.g., printing, postage, gasoline)

<u>BUSINESS CARDS</u>	\$ <u>55.18</u>
<u>PACIFIC PRINTOUT</u>	\$ <u>67.00</u>
<u>LUMBER (LOHES)</u>	\$ <u>54.54</u>
_____	\$ _____
_____	\$ _____
_____	\$ _____

Total of Expenditures (\$100 or less each payee) \$ 176.72

b. Itemized Campaign Expenditures (Over \$100 each payee this period) \$ 941.78

c. Itemized Other Expenditures (Over \$100 each payee this period) \$ _____

d. TOTAL EXPENDITURES (other than loan repayments)(add 19.a., 19.b. and 19.c.) \$ 1117.50

20. LOAN REPAYMENTS MADE THIS PERIOD \$.00

21. TOTAL DISBURSEMENTS (add 19.d. and 20.) (must be shown in item 12.c.) \$ 1117.50

22. IN-KIND CONTRIBUTIONS

a. Unitemized in-kind contributions (\$100 or less from each source this period) \$.00

b. Itemized in-kind contributions (over \$100 from each source this period) \$.00

c. TOTAL IN-KIND CONTRIBUTIONS RECEIVED THIS PERIOD (add 22.a. and 22.b.) \$.00

23. LOANS

LOANS OUTSTANDING (must be shown in item 12.e.) \$ _____

24. OBLIGATIONS

a. Unitemized Obligations Outstanding (\$100 or less each) \$.00

b. Itemized Obligations Outstanding (Over \$100 each) \$.00

c. TOTAL OBLIGATIONS OUTSTANDING (add 24.a. and 24.b.) (must be shown in item 12.f.) \$.00



ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE JIM ADAMS		2. REPORT COVERING THE PERIOD FROM 3-01-01 TO 7-25-01	
3. TOTAL ITEMIZED IN-KIND CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)		Amount 325.00	
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED IN-KIND CONTRIBUTION (in-kind contributions totaling more than \$100 from any contributor during the period)			
First Name JAMES		Middle Name M.	
Last Name/Organization Name GRANT		In-Kind Contribution Received For: <input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election <input type="checkbox"/> Other Election (Specify)	
Address 10931 OLD DAYTON PIKE		Date of In-Kind Contribution	
City SOODY-DAISY	State TN	Zip Code 37319	Value of In-Kind Contribution 25.00
Description of In-Kind Contribution		Aggregate this Election 25.00	
First Name W.		Middle Name C.	
Last Name/Organization Name BELFORD		In-Kind Contribution Received For: <input type="checkbox"/> Primary Election <input type="checkbox"/> General Election <input type="checkbox"/> Other Election (Specify)	
Address 526 SOODYVIEW LN		Date of In-Kind Contribution	
City SOODY-DAISY	State TN	Zip Code 37319	Value of In-Kind Contribution 50.00
Description of In-Kind Contribution		Aggregate this Election 50.00	
First Name GEORGE		Middle Name	
Last Name/Organization Name LUTTRELL		In-Kind Contribution Received For: <input type="checkbox"/> Primary Election <input type="checkbox"/> General Election <input type="checkbox"/> Other Election (Specify)	
Address 1128 HARBOR POINT DR		Date of In-Kind Contribution	
City SOODY-DAISY	State TN	Zip Code 37319	Value of In-Kind Contribution 150.00
Description of In-Kind Contribution		Aggregate this Election 150.00	
First Name PAT		Middle Name A	
Last Name/Organization Name ELLIOTT		In-Kind Contribution Received For: <input type="checkbox"/> Primary Election <input type="checkbox"/> General Election <input type="checkbox"/> Other Election (Specify)	
Address 229 ELLIOTT ST		Date of In-Kind Contribution	
City SOODY-DAISY	State TN	Zip Code 37319	Value of In-Kind Contribution 100.00
Description of In-Kind Contribution		Aggregate this Election 100.00	
First Name		Middle Name	
Last Name/Organization Name		In-Kind Contribution Received For: <input type="checkbox"/> Primary Election <input type="checkbox"/> General Election <input type="checkbox"/> Other Election (Specify)	
Address		Date of In-Kind Contribution	
City	State	Zip Code	Value of In-Kind Contribution
Description of In-Kind Contribution		Aggregate this Election	
First Name		Middle Name	
Last Name/Organization Name		In-Kind Contribution Received For: <input type="checkbox"/> Primary Election <input type="checkbox"/> General Election <input type="checkbox"/> Other Election (Specify)	
Address		Date of In-Kind Contribution	
City	State	Zip Code	Value of In-Kind Contribution
Description of In-Kind Contribution		Aggregate this Election	
First Name		Middle Name	
Last Name/Organization Name		In-Kind Contribution Received For: <input type="checkbox"/> Primary Election <input type="checkbox"/> General Election <input type="checkbox"/> Other Election (Specify)	
Address		Date of In-Kind Contribution	
City	State	Zip Code	Value of In-Kind Contribution
Description of In-Kind Contribution		Aggregate this Election	
5. TOTAL ITEMIZED IN-KIND CONTRIBUTIONS (Carry forward to item 3. of next page if additional pages of this form are used.) (If this is the last page of in-kind contributions, this amount must be shown in item 22b. of summary.)			325.00



ITEMIZED STATEMENT OF CAMPAIGN EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <u>ADAM S</u>		2. REPORT COVERING THE PERIOD FROM: <u>3-01-07</u> TO: <u>7-25-07</u>	
3. TOTAL ITEMIZED CAMPAIGN EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page)			Amount
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CAMPAIGN EXPENDITURE (expenditures totaling more than \$100 to any payee during the period)			
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name <u>RIVER CITY GRAPHICS</u>		<u>PRINTING</u>	<u>941.78</u>
Address <u>1919 ROSSVILLE AVE.</u>			
City <u>CHATT</u>	State <u>TN</u> Zip Code <u>37408</u>		
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name			
Address			
City	State Zip Code		
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name			
Address			
City	State Zip Code		
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name			
Address			
City	State Zip Code		
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name			
Address			
City	State Zip Code		
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name			
Address			
City	State Zip Code		
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name			
Address			
City	State Zip Code		
5. TOTAL ITEMIZED CAMPAIGN EXPENDITURES (Carry forward to item 3 of next page if additional pages of this form are used.) (If this is the last page of expenditures, this amount must be shown in item 19b. of summary.)			<u>941.78</u>



ITEMIZED STATEMENT OF LOANS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <div style="font-family: cursive; font-size: 1.2em;">Jim Adams</div>					2. REPORT COVERING THE PERIOD FROM: 03-01-01 TO: 07-25-01		
3. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED LOAN (loans totaling more than \$100 from any source during the period)							
Complete the Following for the Source of the Loan							
First Name		Middle Name		Outstanding Loan Balance (Beginning of Period)	Loans Received	Loan Payments	
Last Name/Organization Name						Outstanding Loan Balance (End of Period)	
Address				Loan Received For:		Date of Loan	
City		State	Zip Code	<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election <input type="checkbox"/> Other Election (Specify)			
List All Endorsers or Guarantors for Above Loan (If more space is needed please attach a page)							
First Name		Middle Name		First Name		Middle Name	
Last Name/Organization Name				Last Name/Organization Name			
Address				Address			
City		State	Zip Code	City		State	Zip Code
Amount Guaranteed Outstanding				Amount Guaranteed Outstanding			
First Name		Middle Name		First Name		Middle Name	
Last Name/Organization Name				Last Name/Organization Name			
Address				Address			
City		State	Zip Code	City		State	Zip Code
Amount Guaranteed Outstanding				Amount Guaranteed Outstanding			
First Name		Middle Name		First Name		Middle Name	
Last Name/Organization Name				Last Name/Organization Name			
Address				Address			
City		State	Zip Code	City		State	Zip Code
Amount Guaranteed Outstanding				Amount Guaranteed Outstanding			
First Name		Middle Name		First Name		Middle Name	
Last Name/Organization Name				Last Name/Organization Name			
Address				Address			
City		State	Zip Code	City		State	Zip Code
Amount Guaranteed Outstanding				Amount Guaranteed Outstanding			
4. Totals for all Loans (complete on last page of itemized loans) (Total loans received should also be shown in item 16, on summary page.) (Total loan payments should also be shown in item 20, on summary page.) (Total outstanding loan balance should also be shown in item 23, on summary page.)				Outstanding Loan Balance (Beginning of Period)	Loans Received	Loan Payments	Outstanding Loan Balance (End of Period)
				.00	.00	.00	.00



ITEMIZED STATEMENT OF OBLIGATIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE			2. REPORT COVERING THE PERIOD			
Jim Adams			FROM: 03-01-01		TO: 07-25-01	
3. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED OBLIGATION (obligations totaling more than \$100 owed to any person/vendor at the end of the reporting period)			Outstanding Balance (Beginning of Period)	Debt Incurred This Period	Payments This Period	Outstanding Balance (End of Period)
First Name	Middle Name					
Last Name/Business Name						
Address						
City	State	Zip Code				
Description of Obligation						
First Name	Middle Name					
Last Name/Business Name						
Address						
City	State	Zip Code				
Description of Obligation						
First Name	Middle Name					
Last Name/Business Name						
Address						
City	State	Zip Code				
Description of Obligation						
First Name	Middle Name					
Last Name/Business Name						
Address						
City	State	Zip Code				
Description of Obligation						
First Name	Middle Name					
Last Name/Business Name						
Address						
City	State	Zip Code				
Description of Obligation						
4. TOTALS (Total from Outstanding Balance - (End of Period) column must also be shown in item 24b on summary page.)			.00	.00	.00	.00

